

FEC FORM 3L**REPORT OF CONTRIBUTIONS BUNDLED BY LOBBYISTS/REGISTRANTS
AND LOBBYIST/REGISTRANT PACs**RECEIVED
U.S. SENATE
PUBLIC RECORDS

16 APR 15 PM 2:31

1. NAME OF COMMITTEE (in full) TYPE OR PRINT

Example: If typing, type over the lines.

12FE4M5

Bennet for Colorado

ADDRESS (number and street)

PO Box 3078



Check if different than previously reported. (ACC)

Denver

CITY

CO

STATE

80201

ZIP CODE

2. FEC IDENTIFICATION NUMBER

C C00458398

3. IS THIS REPORT

☒ NEW (N)

OR

☐ AMENDED (A)

4. STATE DISTRICT

CO

00

For Candidates Only

5. TYPE OF REPORT
(Choose One)

(a) Quarterly Reports:

☒ April 15 Quarterly Report (Q1)☐ July 15 Quarterly Report (Q2) and/or Semi-annual Report☐ October 15 Quarterly Report (Q3)☐ January 31 Year-End Report (YE) and/or Semi-annual Report☐ July 31 Mid-Year Report (Non-election Year - PAC/Party) (MY) and/or Semi-annual Report

(b) Monthly Report Due On: ☐ Feb 20 (M2) ☐ May 20 (M5) ☐ Aug 20 (M8) ☐ Nov 20 (M11) (Non-Election Year Only)

☐ Mar 20 (M3) ☐ Jun 20 (M6) ☐ Sep 20 (M9) ☐ Dec 20 (M12) (Non-Election Year Only)

☐ Apr 20 (M4) ☐ Jul 20 (M7) and/or Semi-annual Report ☐ Oct 20 (M10) ☐ Jan 31 (YE) and/or Semi-annual Report

(c) 12-Day PRE-Election Report for the: ☐ Primary (12P) ☐ General (12G) ☐ Runoff (12R)

☐ Special (12S) ☐ Convention (12C)

This report also covers the semi-annual period

Election on / / in the State of

See Line 6(b)

(d) 30-Day POST-Election Report for the: ☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)

This report also covers the semi-annual period

Election on / / in the State of

See Line 6(b)

6. Covered Period(s)

(a) Quarterly/Monthly/Pre-/Post-Election Covered Period

(b) Semi-annual Covered Period

This report covers

01 / 01 / 2016

01 / 01 / 2016

2016

through

03 / 31 / 2016

03 / 31 / 2016

2016

and/or

☐ January 1 - June 30☐ July 1 - December 31

7. Total Reportable Bundled Contributions by Lobbyists/Registrants or Lobbyist/Registrant PACs

(a) Quarterly/Monthly/Pre-/Post-Election Covered Period

(b) Semi-annual Covered Period

69834.86

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Theresa Pena

Signature of Treasurer

Theresa Pena

Date

04 / 15 / 2016

15 / 15 / 2016

2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3L**

02/2009

201604150200109801